

**SECTION 1**  
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
  
Donna M. Paul  
1003 Laddington Lane  
Peachtree City, GA 30269

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent  
*[Signature]* ☐ Addressee

B. Received by (Print Name) ☐ Agent  
*[Signature]* ☐ Addressee

C. Date of Delivery  
*04/17/08*

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No  
*9:07mc 3370*  
*#12 order*

3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number  
(Transfer from service label)  
7007 2680 0003 1842 3443

PS Form 3811, February 2004  
Domestic Return Receipt